ALASKA PUBLIC OFFICES COMMISSION 2007 PUBLIC OFFICIAL FINANCIAL DISCLOSURE STATEMENT

BACKGROUND INFORMATION

 This report is for judges and malieutenant governor; the incumber incumbent municipal officials and incumbent legislators. 	ent governor and lieutenant gov	vernor; executiv	ve branch public officials;
2. This report is for the preceding cale interests held between January 1,		nation about fi	nancial
3. You must show your financial inter children during the preceding calen <i>Municipal officers are not require</i>	dar year. NOTE:	•	•
4. If you need help, call APOC at 276	-4176.		
5. SIGN THIS REPORT ON THE I	LAST PAGE		
NAME:			
OCCUPATION:	Phone		Fax Number
MAILING ADDRESS:	ess or Post Office Box)	E Mo:	l Address
(Current Street Addr	ess or Post Office Box)	E-Mai	1 Address
(City/Town and Zip C	Code)		_
OFFICE HELD OR SOUGHT (CH	ECK ONE): State	Municipal	
OFFICE:	TERM OF OFFICE: From _		to
TITLE:			
TYPE OF STATEMENT (CHECK O	NE):		
☐ CANDIDATE STATEMENT☐ INITIAL STATEMENT☐ ANNUAL STATEMENT	Must be filed with your declars For newly appointed state and Due by March 15		
SPOUSE OR DOMESTIC PARTNER	R:		
DEPENDENT CHILDREN:			

SCHEDULE A

SOURCES OF INCOME OVER \$5,000

Salaried Employment	If NONE reportable, check box $\rightarrow \Box$
Report the name of each employ \$5,000 during calendar year 200	er who paid you, your spouse, domestic partner or dependent children more than 6. See page 12 of the instruction manual for more help.
Name of filer, spouse, domest	ic partner, or child:
Employer's Name:	
Name of filer, spouse, domest	ic partner, or child:
Employer's Name:	
	ic partner, or child:
Employer's Name:	
Name of filer, spouse, domest	ic partner, or child:
Employer's Name:	
Self-Employment	If NONE reportable, check box →
	ach self-employment business that was a source of income of more than \$5,000 for
you, your spouse, domestic par	tner or dependent child during calendar year 2006.
If the business is non-retail, over \$5,000.	list the first and last name of each client or customer who paid the business
corporation; or if you held (i	e proprietor, partnership, limited liability company, shareholder in a professional ndividually or with another family member) more than 50% of the stock in a th this section, see pages 13-15 of the Manual.
Name of filer, spouse, domest	ic partner, or child:
_	
	(If you check non-retail, list clients/customers below.)
Name of client/customer:	
_	
_	
Name of filer, spouse, domest	ic partner, or child:
Business Name:	
Retail Non-Retail	(If you check non-retail, list clients/customers below.)
Name of client/customer:	
_	

SCHEDULE A

SOURCES OF INCOME OVER \$5,000

Rental Income	If NONE reportable, check box $\rightarrow \Box$
List the first and last name of each tenant from whom over \$50 property is located outside Alaska and managed by a person dependent child, you may list the managing agent instead of help with this section.	other than you, your spouse, domestic partner or
Owner (filer, spouse, domestic partner, or child)	Tenant(s)
Dividends and Interest	If NONE reportable, check box →
	· ·
See page 17 of the manual for more help.	use year such as 15141 stock of Cordo va 14 american Bonds.
• (Report the assets of a retirement account or trust on	page 6)
Recipient (filer, spouse, domestic partner, or child)	Name of Source of Income
Other Income	If NONE reportable, check box \rightarrow
List each source of income over \$5,000 not listed elsewhere assistance, workman's compensation, unemployment, the nar retirement; the name of the person who paid alimony or child living expenses.	me of the buyer of real property; social security;
See page 18 of the manual for more help.	
Recipient (filer, spouse, domestic partner, or child)	Name of Source
Gifts	If NONE reportable, check box \rightarrow
List the source of gifts which have a value of or cumulative spouse, domestic partner, parent, child, sibling, grandparent gifts include: cash, a debt that is forgiven, scholarships, and page 19 of the manual for more examples and help with the	re value of more that \$250 except gifts received from a nt, aunt, uncle, niece or nephew. Some examples of discounts not extended to the general public. See
Recipient (filer, spouse, domestic partner or child)	NAME OF SOURCE

SCHEDULE B

BUSINESS INTERESTS

Business Interests	If NONE reportable, check box \rightarrow
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Report all business interests even if they were not sources of income to you, your spouse, domestic partner, or dependent child during **calendar year 2006.**

- List ownership interests of more than \$5,000 as a shareholder in publicly traded stocks, that are not listed elsewhere on this form. (A list of the names of publicly traded stocks such as IBM or Intel may be listed by name only on a separate page.)
- List ownership interests in non-publicly traded companies such as a sole proprietor, shareholder, owner, partner, officer, or director including ownership interests in native corporations.
- List interests in limited liability companies
- List director or officer position in profit and non-profit organizations.

Describe the business activity with sufficient detail to tell a reader what the organization actually does.

See page 20 of the manual for more help.

Name of filer, spouse, domestic partner, or child:
Business Name:
Business Address:
Nature of Interest:
Description of Business's Activity:
Name of filer, spouse, domestic partner, or child:
Business Name:
Business Address:
Nature of Interest:
Description of Business's Activity:
Name of filer, spouse, domestic partner, or child:
Business Name:
Business Address:
Nature of Interest:
Description of Business's Activity:
Name of filer, spouse, domestic partner, or child:
Business Name:
Business Address:
Nature of Interest:
Description of Business's Activity:

SCHEDULE C

REAL PROPERTY INTERESTS/RENT TO OWN

Real Property Interests	If NONE reportable, check box \rightarrow
Report all property interests such as your home, neighboring los recreational, business property or limited partnerships including through a trust or sold during calendar year 2006.	
Include a street address, city and state <u>or</u> complete legal descripmile post markers or post offices boxes.	ntion for each piece of property listed. Do not use
Use copies of this page if you need additional space to complete See page 21 of the manual for more help.	e this section.
Name of filer, spouse, domestic partner, or child:	
Street Address or Legal Description:	
City or Borough and State:	
Nature of Interest:	
(Option to Buy, Ownership, Leasehold)	Current Use (Optional)
Name of filer, spouse, domestic partner, or child:	-
Street Address or Legal Description:	-
City or Borough and State:	-
Nature of Interest:	
(Option to Buy, Ownership, Leasehold)	Current Use (Optional)
Name of filer, spouse, domestic partner, or child:	
Street Address or Legal Description:	
City or Borough and State:	
Nature of Interest: (Option to Buy, Ownership, Leasehold)	Current Use (Optional)
	,
Name of filer, spouse, domestic partner, or child:	
Street Address or Legal Description:	
City or Borough and State:	
Nature of Interest: (Option to Buy, Ownership, Leasehold)	Current Use (Optional)
Name of filer, spouse, domestic partner, or child:	
Street Address or Legal Description:	
City or Borough and State:	
Nature of Interest:	
(Option to Buy, Ownership, Leasehold)	Current Use (Optional)

SCHEDULE D

BENEFICIAL INTEREST IN TRUSTS & RETIREMENT ACCOUNTS Exceeding \$5,000

Trusts & Retirement Accounts	If NONE reportable, check box \rightarrow
Report each beneficial interest in a trust or retirement as dependent children that exceeded \$5,000 during calenda benefit accounts (pension and profit-sharing accounts)	r year 2006. Retirement accounts include <u>employee</u> is), and retirement accounts (IRA, 401K, SEP or
Keogh). Assets of a trust or retirement account include s property.	stocks, bonds, mutual funds, cash accounts, CD's, real
 Name the trustor (the <u>person</u> or <u>employer</u> who provided If a trust or retirement account is self directed, also list <u>t</u> <u>Growth Fund</u>. See page 22 of the manual for more help. 	
Name of filer, spouse or domestic partner, or child:	Extent of Interest (Percent)
Name of the person, employer or entity who provided the funds or asset	s (Trustor)
Name(s) of the stocks, bonds, mutual funds or other assets contained in	the retirement account or trust
Name of filer, spouse or domestic partner, or child:	Extent of Interest (Percent)
Name of the person, employer or entity who provided the funds or asset	s (Trustor)
Name(s) of the stocks, bonds, mutual funds or other assets contained in	the retirement account or trust
Name of filer, spouse or domestic partner, or child:	Extent of Interest (Percent)
Name of the person, employer or entity who provided the funds or asset	s (Trustor)
Name(s) of the stocks, bonds, mutual funds or other assets contained in	the retirement account or trust
Name of filer, spouse or domestic partner, or child:	Extent of Interest (Percent)
Name of the person, employer or entity who provided the funds or asset	s (Trustor)
Name(s) of the stocks, bonds, mutual funds or other assets contained in	the retirement account or trust
Name of filer, spouse or domestic partner, or child:	Extent of Interest (Percent)
Name of the person, employer or entity who provided the funds or asset	s (Trustor)

Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

SCHEDULE E LOANS, LOAN GUARANTEES, AND DEBTS OF \$5,000 OR MORE

NATURAL RESOURCE LEASES

Loans, Loan Guarantees, and Debts	If NONE reportable, check box $\rightarrow \square$
Report the name of each creditor or lender to whom more your spouse, domestic partner, or dependent children.	than \$5,000 was owed during calendar year 2006 by you,
	nents; medical bills; mortgage, boat and auto loans; business as; and promissory notes. Loans include secured, unsecured
Circle whether the entity is a lender, creditor or guarantor. section.	. See page 23 of the manual for more help with this
Name of Debtor (filer, spouse, domestic partner or child)	Name of Lender/Creditor/Guarantor
Name of Debtor (filer, spouse domestic partner or child)	Name of Lender/Creditor/Guarantor
Name of Debtor (filer, spouse, domestic partner or child)	Name of Lender/Creditor/Guarantor
Name of Debtor (filer, spouse, domestic partner or child)	Name of Lender/Creditor/Guarantor
Name of Debtor (filer, spouse, domestic partner or child)	Name of Lender/Creditor/Guarantor
Name of Debtor (filer, spouse, domestic partner or child)	Name of Lender/Creditor/Guarantor
Natural Resource Leases	If NONE reportable, check box \rightarrow
Report this information for yourself, your spouse, domest	or oil leases bid held or offered during calendar year 2006 . tic partner or dependent child who was a sole proprietor, a e a member; or a corporation in which you or your family ontrolling interest.
Leaseholder	Nature of Lease
Indicate: Bid, held or offer made	Identity of Lease and Description
Leaseholder	Nature of Lease
Indicate: Bid, held or offer made	Identity of Lease and Description

GOVERNMENT CONTRACTS AND LEASES

CERTIFICATION

Contracts and Offers to Contract	If NONE reportable, check box \rightarrow	
List all contracts and offers to contract with the state or instrumentality of the state or a municipality during calendar year 2006 held, bid or offered. Report this information for yourself, your spouse, domestic partner or, dependent children who was a sole proprietor, a partnership or professional corporation of which you are a member; or a corporation in which you or your family members listed above (or a combination of them) held a controlling interest.		
See page 25 of the manual for more help.		
Name(s) of Contractor	Contracting Agency/Department	
Indicate: Bid, held or offer made	Contract number and description	
Name(s) of Contractor	Contracting Agency/Department	
Indicate: Bid, held or offer made	Contract number and description	
CERTIFICATION I certify under penalty of perjury that the information in this Statement is, to the best of my knowledge, true, correct and complete. A person who makes a false sworn certification which he or she does not believe to be true is guilty of perjury.		
SIGNATURE	DATE	
Printed Name of Filer	Place	

Where to file this Statement

MUNICIPAL OFFICIALS AND CANDIDATES - File <u>Statements</u> with the local City or Borough Clerk in the jurisdiction where you hold or seek office

STATE CANDIDATES: - File <u>Candidate</u> Statements with the Division of Elections along with your Declaration of Candidacy

State officials: - File initial and annual Statements with the Alaska Public Offices Commission at:

2221 E. Northern Lights #128 Anchorage, AK 99508-4149 Telephone 907/276-4176 FAX 907/276-7018 OR PO Box 110222 Juneau, AK 99811-0222 240 Main, Rm. 201 Telephone 907/465-4864 FAX 907/465-4832